## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/ 573,443

FILING DATE

APPLICANT(S)

**CLAIMS** 

| <u> </u>               | <del></del>  |  |      |   |  |          |    |                    |                | (            |
|------------------------|--------------|--|------|---|--|----------|----|--------------------|----------------|--------------|
|                        | AS FILED     |  |      | AFTER 1*AMENDMENT                       |  |          |    | AFTER 2 MAMENDMENT |                |              |
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| 50<br>TOTAL            |              |  | L    |   |  |          |    |                    |                |              |
| TOTAL<br>IND.          | 7            |  |      |   | ,  | I I      |    |                    | T              |              |
| TOTAL<br>DEP.          | .13          | _ <b>4</b>                                       |      |   | 4  | Ĭ        |    |                    | <b>~</b>       |              |
| TOTAL<br>CLAIMS        | 14           |  |      |   | 4  |          |    |                    |                |              |
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|                 | IND.     | DEP.        | IND.          | DEP.        | IND.                      | DEP.     |  |
| 51<br>52        |          |             |               |             |                           |          |  |
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| 81<br>82        |          |             |               |             |                           |          |  |
| 83              |          |             |               |             | <u>·</u>                  |          |  |
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| 91<br>92        |          |             |               |             |                           |          |  |
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| 100<br>TOTAL    |          |             |               | $\Box$      |                           |          |  |
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| TOTAL<br>DEP.   |          | <b> -</b>   |               |             |                           |          |  |
| TOTAL<br>CLAIMS |          |             |               |             |                           | S.E.     |  |
|                 | U.S      | . DEPARTMI  | MOO IN THE    |             |                           |          |  |

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